

PATENT APPLICATION FEE DETERMINATION RECORD
Effective January 1, 2003

Application or Docket Number

10,669,034

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS	17	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	17 minus 20 = *	8
INDEPENDENT CLAIMS	5 minus 3 = *	2
MULTIPLE DEPENDENT CLAIM PRESENT		<input type="checkbox"/>

* If the difference in column 1 is less than zero, enter "0" in column 2

10/21/05 CLAIMS AS AMENDED - PART II

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	* 26	Minus	** 20 = 6
Independent	* 5	Minus	*** 5 = -
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

1,5,10,12,13.

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus	** =
Independent	*	Minus	*** =
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

SMALL ENTITY TYPE	OTHER THAN SMALL ENTITY
RATE	FEES
BASIC FEE	375.00
OR	BASIC FEE
X\$ 9=	
OR	X\$18=
X42=	
OR	X84=
+140=	
OR	+280=
TOTAL	
OR	TOTAL 918

SMALL ENTITY	OTHER THAN SMALL ENTITY
RATE	ADDITIONAL FEE
X\$ 9=	
OR	X\$18= 300
X42=	
OR	X84=
+140=	
OR	+280=
TOTAL ADDIT. FEE	
OR	TOTAL ADDIT. FEE 300

RATE	ADDITIONAL FEE
X\$ 9=	
OR	X\$18=
X42=	
OR	X84=
+140=	
OR	+280=
TOTAL ADDIT. FEE	
OR	TOTAL ADDIT. FEE

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus	** =
Independent	*	Minus	*** =
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

RATE	ADDITIONAL FEE
X\$ 9=	
OR	X\$18=
X42=	
OR	X84=
+140=	
OR	+280=
TOTAL ADDIT. FEE	
OR	TOTAL ADDIT. FEE

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number CM06386J										
In re Application of Application Number For Group Art Unit	Ellis A. Pinder 10/669,034 METHOD AND APPARATUS TO SELF-CONFIGURE AN ACCESSORY DEVICE 2687	RECEIVED CENTRAL FAX CENTER OCT 21 2005										
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows: (check time period desired):</p> <table border="1"> <tr><td><input checked="" type="checkbox"/> One Month (37 CFR 1.17(a)(10))</td><td>\$120.00</td></tr> <tr><td><input type="checkbox"/> Two Months (37 CFR 1.17(a)(2))</td><td>\$450.00</td></tr> <tr><td><input type="checkbox"/> Three Months (37 CFR 1.17(a)(3))</td><td>\$1020.00</td></tr> <tr><td><input type="checkbox"/> Four Months (37 CFR 1.17(a)(4))</td><td>\$1590.00</td></tr> <tr><td><input type="checkbox"/> Five Months (37 CFR 1.17(a)(5))</td><td>\$2160.00</td></tr> </table> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the amount shown above is reduced by one-half, and the resulting fee is \$ _____</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required or credit any overpayment, to Deposit Account Number 502117. The Deposit Account Name is Motorola, Inc.</p> <p>I have enclosed a duplicate copy of this sheet.</p> <p>I am the:</p> <p><input type="checkbox"/> Applicant/inventor</p> <p><input type="checkbox"/> Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).</p> <p><input checked="" type="checkbox"/> Attorney or agent of record (Registration No.: <u>39,505</u>)</p> <p><input type="checkbox"/> Attorney or agent under 37 CFR 1.34(a) Registration number if acting under 37 CFR 1.34(a) _____</p>			<input checked="" type="checkbox"/> One Month (37 CFR 1.17(a)(10))	\$120.00	<input type="checkbox"/> Two Months (37 CFR 1.17(a)(2))	\$450.00	<input type="checkbox"/> Three Months (37 CFR 1.17(a)(3))	\$1020.00	<input type="checkbox"/> Four Months (37 CFR 1.17(a)(4))	\$1590.00	<input type="checkbox"/> Five Months (37 CFR 1.17(a)(5))	\$2160.00
<input checked="" type="checkbox"/> One Month (37 CFR 1.17(a)(10))	\$120.00											
<input type="checkbox"/> Two Months (37 CFR 1.17(a)(2))	\$450.00											
<input type="checkbox"/> Three Months (37 CFR 1.17(a)(3))	\$1020.00											
<input type="checkbox"/> Four Months (37 CFR 1.17(a)(4))	\$1590.00											
<input type="checkbox"/> Five Months (37 CFR 1.17(a)(5))	\$2160.00											

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

October 21, 2005

Date

Signature

954-723-6449

Barbara R. Doutre

Telephone Number

Type or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required.

Submit multiple forms if more than one signature is required, see below.

Total of 2 form(s) are submitted

This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P. O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450.

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